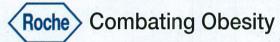




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L-ewwel u qabel kollox, ghand McDonald's naccertaw li l-prodotti li noffru lill-klijenti taghna jkunu mharsa u ta' I-aqwa kwalità. Nuzaw biss ingredjenti u prodotti Ii jissodisfaw I-oghla kriterji ta' kwalità u Ii huma ufficjalment approvati, kemm mill-awtoritajiet lokali, kif ukoll minn dawk ta' l-Unjoni Ewropeja.

II-Hamburgers ta' McDonald's huma magħmulin 100% miċ-Ċanga u xejn iżjed. Minn dejjem użajna Canga mehuda mill-muskoli, maqtugha bl-idejn minn ma' I-ispalla, I-koxxa u I-falda. Dan huwa I-laham li ghand McDonald's dejjem użajna biex nipproduću I-hamburgers. Ma jintużaw qatt fdalijiet ta' laham li jibqghu żejda wagt I-ipprocessar.

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Ahna nahdmu mal-fornituri taghna biex naccertaw li tul il-process kollu tal-produzzjoni jiğu mharsa I-proceduri kollha possibbli li jassiguraw ikel genwin ta'l-aqwa kwalità. Biex inkunu certi minn dan, ghandna sistemi stretti ta'ccekkjar kemm interni, kif ukoll esterni. EFSIS hija entità indipendenti li tiehu hsieb tara li I-fornituri taghna jharsu bir-regga r-regolamenti kollha mehtiega u ticcertifika l-kwalità u l-genwinità tal-prodotti li nservu u s-sistemi li jassigurawhom.

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IL-MUSBIEH

Nru.: 13

April 2001

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Set & Printed: A&M Printing Ltd. - 553217

Cirkulazzjoni: 2000 kopja

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Editorjal

Sena ġdida...l-istess problemi

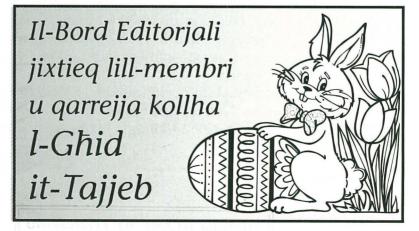
Is-sena 2001 reģgħet bdiet bħas-sena 2000 bis-swali ta' l-isptar ippakkjati bħas-sardin. U dan kollu wara li s-sena l-oħra tgħidx kemm saru wegħdi li din hi sitwazzjoni ta ftit żmien. Pero ix-xhur issa qed igerrbu u s-sitwazzjoni qed tiggrava. Donnu sar biss paroli mill-awtoritajiet biex din is-sitwazzjoni titranġa jew tittaffa. Kollu blalen tas-sapun il-kliem li jintqal għax meta niġu għal fatti naraw biss il-kuntrarju.

Donnu in-nurses biss iridu jħarsu lejn il-pazjent bħala persuna għax l-awtorità numri biss tara, u ma jimpurtahiex jekk is-sodda hiex f'kurutur jew fejn suppost. Forsi għax l-awtorità is-sodod tagħhom qatt ma jkunu f'kuritur?

Xi nghidu ghas-servizz li ahna n-nurses qed naghtu? Dan jista jinghata kif suppost jekk ghal kull nurse hemm 10 pazjenti? Is-sahha tan-nurses jimpurtah xi hadd minnha? Jew l-aqwa li jsir ix-xoghol u sakemm ma jinqala xejn kollox sew? In-nurses ghandhom id-dritt li jesegwixxu x-xoghol taghhom kif suppost biex ma jbati hadd. Iva n-nurses qed ibatu minhabba nuqqas ta' serjeta mill-awtoritajiet koncernati u dan qed jikkawża stress bla bżonn kemm lil pazjenti kif ukoll lin-nurses.

Is-swali fl-isptar mhux qed iservu għal użu propju tagħhom. Huma ħafna dawk li qed jistennew biex imorru f'residenza jew oħra ta' l-anzjani. X'qed isir biex is-swali ma jibqgħux jintużaw bħala waiting area? L-eta' ta kemm wieħed jgħix qiegħda dejjem tikber, allura ser nibqgħu hekk?

Ir-responsabilità hija ta' kulhadd, li l-pazjenti jiehdu l-kura mehtiega kollha, minghajr ebda distinzjoni ta'klassi. Hadd m'ghandu dritt ghax hu moqdi ma jaghtix każ tal-bżonnijiet neccessarji tal-pazjenti. Ghal pazjenti huma responsabbli n-nurses u t-tobba, biex jiehdu hsiebhom imma r-responsabilità hija ta'l-awtorità wkoll biex tara li l-pazjent ghandu post xieraq fejn jigi kkurat, minghajr ma nehhu d-dinjità ta' bniedem.



II Messaġġ mill-President

Għeżież Membri,

Bdejna sena ġdida, is-sena 2001, u mhux talli s-sena l-oħra ccelebrajna millenju ġdid iżda issa bdejna wkoll innaqqru minnu. Din is-sena tfisser ħafna għall-Union għax propju f'Settembru se niċċelebraw il-ħames sena mit-twaqqif ta' l-MUMN. Ilna ħames snin u qisu l-bieraħ. Niftakar meta ltqajna l-ewwel darba fid-19 ta' Settembru, 1996 f'Haż Zabbar u ddikjarajna b'mod ufficjali l-eżistenza u l-bidu ta' l-MUMN.

Kien hemm minn haseb li din kienet se tkun biss holma u tispicca qabel tibda u kien hemm ukoll min qal li n-Nurses u l-Midwives ppruvaw kemm ildarba jiffurmaw Union iżda kollu ghal xejn u dan ser tkun biss attentat iehor. Iżda f'wiċċhom baqa'. L-MUMN baqghet ghaddejja u minkejja li ghaqdiet, li suppost jghaqqdu l-haddiema ghamlu biss xkiel, dan kien kollu ghal xejn, ghax kulljum din il-Union taghna dejjem tissahhah u tkabbar in-numru tal-Membri fi hdanha. Huwa unur kbir ghalija li ghandi x-xorti li kont maghżul minnkhom bhala l-President tal-Union sa mill-bidu nett u dan jobbligani sabiex naqdi d-dmir tieghi lejali lejkom u lejn il-professjonijiet li nirrapreżenta.

Iżda l-MUMN hija b'sahħitha għax mhiex magħluqa biss fil-Kumitat Eżekuttiv iżda f'partecipazzjoni sħiħa vicin tal-Membri tagħha li huma intom. Dan isir permezz tal-Group Committees li l-Union għandha f'kull Sptar u Centru tas-Saħħa. Fil-fatt bħalissa l-MUMN għaddejja f'process sabiex jiġu ffurmati dawn il-Group Committees mill-ġdid u b'hekk qed isiru elezzjonijiet f'kull Sptar biex intom telleġġu r-rappreżentanti tagħkom. B'hekk il-Union tibqa' vicin tagħkom u t-tmexxija tal-Union permezz ta' dawn il-Kumitati hi f'idejn il-Membri kollha. Dawn ir-Rappreżentanti għandhom l-obbligu li jgħinukom u jiddefendukom u permezz tagħhom inkunu nistgħu nfasslu l-ħtiġijiet tagħkom il-Membri u nkunu f'pożizjoni li ngħamlu t-talbiet li verament tixtiequ jsiru għalikom. L-appell tiegħi għal darba oħra hu sabiex tgħamlu użu minn dawn il-Group Committees u turu fiducja sħiħa bħal ma qed juri l-Kumitat Eżekuttiv f'dawn in-nies li bla interessi personali qed jgħinu biex l-MUMN tkompli tikber u b'hekk il-professjonijiet tal-Midwives u n-Nurses ikomplu jiżvillupaw.

L-MUMN din is-sena tgħalaq ħames snin u propju f'Settembru ser issir ġimgħa ta' attivitajiet varji sabiex jiġi ccelebrat u mfakkar dan l-anniversarju.. Fost affarjiet oħra l-MUMN ser tintroduci l-famuż 'Benevolent Fund' u dan ser ikun taħt il-Patruċinju tal-President ta' Malta. L-għan ta' dan il-Benevolent Fund hu sabiex inkattru l-element ta' fratellanza bejnietna u ngħinu lil xulxin meta fil-bżonn. Għaldaqstant nieħu l-opportunità sabiex nirringrazzja lill-E.T. l-President tar-Repubblika li aċċetta mingħajr riservi sabiex propju fit-19 ta' Settembru, jiddikjara uffiċjalment miftuħ dan il-Fund u fl-istess waqt jonorana bil-preżenza tiegħu.

Jiena nghalaq billi nawguralkom l-Ghid it-Tajjeb lilkom u lil familjari taghkom u nawgura hidma kontinwa sabiex inkomplu nsahhu l-ghaqda ta' bejnietna.

Rudolph Cini

I Valmatain

Kelmtejn mis-Segretarja Finanzjarja

Għeżież kollegi,

Nibda billi nesprimi is-sodisfazzjon tiegħi li propju fl-għeluq il-ħames sena mit-twaqqif ta' l-MUMN jiena nagħmel parti mill-Kumitat Eżekuttiv u saħansitra ninsab inkarigata mill-finanzi tal-Union. Hawnhekk nieħu l-opportunità biex nirrigrazzjakom tal-fiducja li urejtu fija fl-elezzjoni għall-Eżekuttiv tal-MUMN. Minkejja ir-rwol difficli li ninsab inkarigata namministra, qed nipprova nagħmlu b'impenn u bi skop biex il-fondi tal-Union jissaħħu.

Bi-pjacir inhares lejn l-ewwel sena tieghi fl-Eżekuttiv tal-MUMN bhala wahda dinamika u bi żviluppi posittivi, tant li matul dan iż-żmien ģiet introdotta s-sistema ta' hlas tas-shubija bid-'direct debit'. Tajjeb li tkunu tafu li bhalissa ghandna madwar 480 'direct debit mandates' iffirmata mill-membri fejn jaghtu l-awtorizzazjoni lil banek (BOV, HSBC, APS u Lombard Bank) biex l-MUMN tkun tista' tiġbed il-hlas tas-shubija ta' kull membru b'mod elettroniku. Dan huwa ta' sodisfazzjon ghalina specjalment meta urejtu din il-fiducja.

Minħabba li l-MUMN hija Unjoni Tredjunistika kif ukoll professjonali, għax hekk titlob il-professjoni tagħna, kemm bħala infermieri kif ukoll bħala Midwives, qed tħallas affiljazzjonijiet mal-Public Service International, mal-European Federation of Public Services Unions, man-National Council of Women u mal-International Council of Nurses. Kif tistgħu tapprezzaw, dawn l-affiljazzjonijiet flimkien mat-tmexxija tal-ufficini li għandha l-Union b'mod partikolari l-ufficcju centrali tal-Fgura, jinvolvu spejjeż kbar. Dawn l-ispejjeż jistgħu jiġu ssuperati biss bl-għajnuna tagħkom billi tħallsu il-menswalita' b'mod regolari, għax dan huwa l-unika mezz ta' dħul għall- MUMN.

Infakkarkom li l-ispejjeż tal-kontijiet bħal tat-telefon, 'faxes', dwal, l-avukat u l-awditur dejjem qed jgħolew. Għalhekk il-Kumitat Eżekuttiv iddecieda li jirrevedi il-miżata tal-Union b'effett mill-ewwel ta' Gunju 2001, kif ġej :- miżata regolari; minn Lm 10 għal Lm 12,

miżata ta' koppja; minn Lm 15 għal Lm 18. miżata ta' Lm 20 se ssir Lm 24 valida għal sentejn u sitt xhur (sitt xhur b'xejn).

Ta' min wiehed jinnota li minn jiddeciedi li jhallas bid-'direct debit' ikun qed jiffacilita il-hajja tar-rapprezentanti u b'hekk ikunu jistghu jiddedikaw aktar hin ghad-diffikultajiet li jkollhom il-membri fuq il-post tax-xoghol. Ghalhekk il-Kumitat Ezekuttiv ihoss li dawk il-membri li qeghdin bis-sistema' ta' 'direct debit' jew inkella dawk li jiddeciedu li jidhlu f'dan is-sistema, il-miżata tibqa' kif kienet qabel, jiġifieri Lm 10 fis-sena u Lm 15 fil-każ ta' koppja. Nitlobkom tifhmu l-importanza ta' dawn il-miżuri u nheġġiġkom sabiex tużaw is-sistema ta' 'direct debit' biex barra li tghin aktar fit-tmexxija tal-MUMN, tiffrankaw fil-miżata.

Dejjem Taghkom,

Mary Ann Buseja

MUMN ~ SEDQA

L-Aġenzija Sedqa flimkien ma' I-Malta Union of Midwives & Nurses se jorganizzaw courses bil-għan li n-Nurses u I-Midwives jkomplu jitharrġu fil-qasam ta' kura lill-pazjenti li jkunu qed jiġu rikoverati wara problemi ta' 'alcohol' u droga. Dawn il-kundizzjonijiet qed iseħhu b'mod regolari fl-Isptarijiet u c-Centri tas-Saħħa f'pajjiżna. Aħna nafu li dawn il-problemi huma realta` u għalhekk hassejna l-ħtieġa li nħejju 'courses' fuq dawn il-materji.

Dawn il-courses se jdumu 8 ģimghat, darba fil-ģimgha, saghtejn kull darba (12.00p.m.- 2.00p.m.). Il-postijiet se jiğu deciżi hekk kif nircievu l-applikazzjonijiet biex inkunu f'pożizzjoni li nsibu postijiet centrali u vicin taghkom kemm jista' jkun possibli. Id-Diviżjoni tas-Sahha accettat it-talba ta' l-MUMN biex min jinzerta xoghol ikun jista' jattendi l-kors bil-kundizzjoni li s-servizz fuq il-post tax-xoghol ma jiġix mfixkel.

II-hlas ghal dan il-kors se jkun ta' Lm2 biss, ghal min hu membru u Lm15 ghal min mhux membru jew mhux aġġornat fil-hlas. Kull min hu interessat ghandu jimla' din il-parti ta' hawn taht u flimkien ma cekk ta' Lm2 jew Lm15 jibghata f'dan l-indirizz : MUMN, 31, Vjal il-Kottoner, Fgura, PLA 17 sa mhux aktar tard mill-20 ta' Mejju, 2001.



Isem u Kunjom	ID No	
GradPost tax-xoghol	Tel	
Indirizz		

International Skin Care Nursing Group — ISNG

By: Corinne Scicluna

he International Skin Care Nursing Group (ISNG) was initiated in 1998 by a group of nurses in Oxford, England who had concerns about skin care provision globally. Their view, that there was a need for consensus on issues related to nursing people with compromised skin function, has been ratified in a number of different quarters. The group is primarily about networking and influencing policy, practice, research and education. Since 1998 the group has been involved in a number of activities aimed at attracting nurses from different parts of the world to communicate with another.

At the beginning of last year, I was approached by this group to become a member of their advisory committee. It was a great challenge for me to accept this offer because I felt I did not have the necessary experience required. However, today I am glad I did. This opportunity has provided me with a global understanding of nursing and also of skin care issues.

The key areas of work has been established as follows:

- The provision of education
- Facilitation of nursing networks
- Working on skin care projects
- Promoting and developing a political function of the group

The provision of Education

One of ISNG's aims is to increase the level knowledge on Skin Care. There are only a few courses in Dermatology and Skin Care that are available to nurses and other health care professionals. Therefore, ISNG is trying to establish a database on available courses on this subject to provide interested nurses with relevant information on how they could further knowledge experience. The group is also with linked the Commonwealth Health Secretariat who is in the process of harmonizing nursing programmes in Commonwealth Africa. A conference is planned to be held next November in Moshi, Tanzania.

Facilitation of Nursing Networks

ISNG is also responsible for a network facility. The network continues to grow and despite hitches technical database is now functioning. Several links have already been made with our group. Now we have formal links with the Dermatology Nursing Association, the East, Central and Southern African College of Nursing and the International Council of Nursing. The group's research nurse is also planning an educational trip to Malta. A seminar is hoped to be held in the near future on skin care. will provide opportunity for all nurses to become more aware of their clients' skin care needs.

A workshop has been organized at the World Congress of Dermatology in Paris - this is entitled 'The role of the Dermatology Nurse'. I will hopefully be presenting a paper in this conference. Again this is an innovative event since nurses and doctors will be listening and learning from one another in a conference that was originally set up doctors and dermatologists.

Working on skin care projects

ISNG is now part of a Global Alliance of governmental and n o n - g o v e r n m e n t a l organizations committed to eliminating Lymphatic Filariasis (LF) by the year 2020. The work on the LF project has moved significantly in Moshi, Tanzania.

LF is a disease that affects 120 million people in 80 countries with around 1 billion people being at risk of contracting the disease. The International Task Force for Disease Elimination has identified LF as one of the 6 infectious diseases that is possible to eliminate. The disease is transmitted by mosquitoes and is only found in humans - animals are unaffected. The disease can be prevented from being transmitted by giving a drug yearly over 4-6 years which kills the microfilarae thus preventing them from being spread to other humans by mosquito. Although the drug can effectively kill the microfilarae they do not reduce the associated swelling which affects 10% of the population in endemic areas. The swelling is caused by inflammatory recurrent

responses caused by bacteria and fungi. It has been shown that meticulous skin hygiene, elevation and exercises can have a large beneficial effect on reducing swelling. This morbidity control improves the immediate quality of life for those with LF.

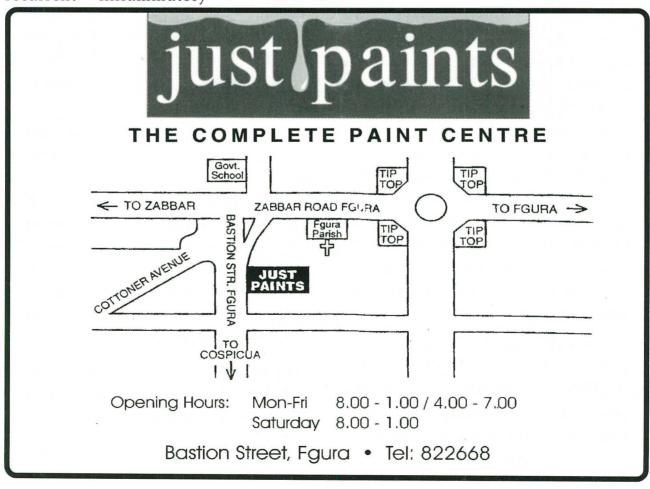
It is in this area of skin hygiene and patient education that the ISNG has become involved. The group will be offering advice about a teaching package for effective skin hygiene measures and will be at the forefront of research into areas associated with this.

Political function of the group

The group continues to try and raise the profile of ISNG and it's work at international level. The LF is a high profile public health project and is an excellent example of how the ISNG can impact on policy and practice at the highest level. Many of the lessons learnt from this project about basic skin care and community involvement will be transferable to other projects in the future.

The group also aims to submit papers in journals and encourage group members to participate in conferences both in general nursing and in Dermatology. Till now we have published a paper in the International Nursing Review, the Journal of the Royal Society for the promotion of Health and the British Journal of Dermatology Nursing.

If you are interested in this work and/or would like to receive more information please contact Corinne Scicluna at: Dermatology Department, Sir Paul Boffa Hospital, Floriana or email on; corpev@yahoo.com



■ Kelmtejn mis-Segretarju Ġenerali

Bhal dan iz-zmien sena kien die elett Kumitat Ezekuttiv ģdid b'mandat għal tlett snin. Dan nista' nghid li rranka gmielu tant li lesta affarjiet aktar milli kien ippjanat. Il-ħidma ko-ordinata li tezisti bejn dan l-Ezekuttiv qisa ilha hemm ghal tul ta' zmien u mhux ta' sena wahda. Issa jmiss li nsahhu il-Group Committees f'diversi Sptarijiet u Centri tas-Saħħa. Dawn huma l-aktar persuni li jkunu vicin il-membri u xoqholhom huwa delikat ghaliex waqt li jkunu huma ta' l-ewwel li jressqu il-problemi ghand l-amministrazzjoni, iridu jzommu kuntatt dirett mal-Ufficcjali ta' l-istess Union biex kif jinhass il-bzonn jintervjeni wkoll il-Kumitat Ezekuttiv.

Dawn il-Group Committees, din is-sena waslitilhom l-elezzjoni taghhom ukoll. Huwa mportanti li l-Group Committee igawdi il-fiducja ta' shabhom li jahdmu maghhom fl-istess Sptar jew Centru tas-Sahha. Sakemm jigi ppubblikat dan lartiklu, ikun ga gie mhabbar ir-rizultat ta' l-elezzjoni tal-Group Committees ta' l-Isptar Zammit Clapp, tar-Residenza San Vincenz de Paule, u ghall-ewwel darba, tal-Midwives. Niehu l-opportunita' sabiex naghmel emfasi fuq l-importanza ta' dawn il-Group Committees u nheggeg lil hafna biex johorgu fuq quddiem biex jikkontestaw ghall-elezzjonijiet.

Bhal ma ghidt qabel, f'artikli precedenti, qed tiġi diskussa liġi ġdida msejha 'Health Care Professions Act' biex tiehu post il-'Medical and Kindred Professions Ordinance'. Din il-liġi hija pass fiddirezzjoni t-tajba, però ghad baqa punt

krucjali, li ghadna ma lhaqniex ftehim fuqu u jidher li ģej ftit fit-tul. Dan huwa l-ghoti tal-'Warrant' mill-President tar-Repubblika lill-iStaff Nurses. Ghalina dan huwa punt kardinali u jista' jghati l-kaz li jekk l-affarjiet jibqghu ma jiccarawx, tissejjah laqgha ghall-iStaff Nurses.

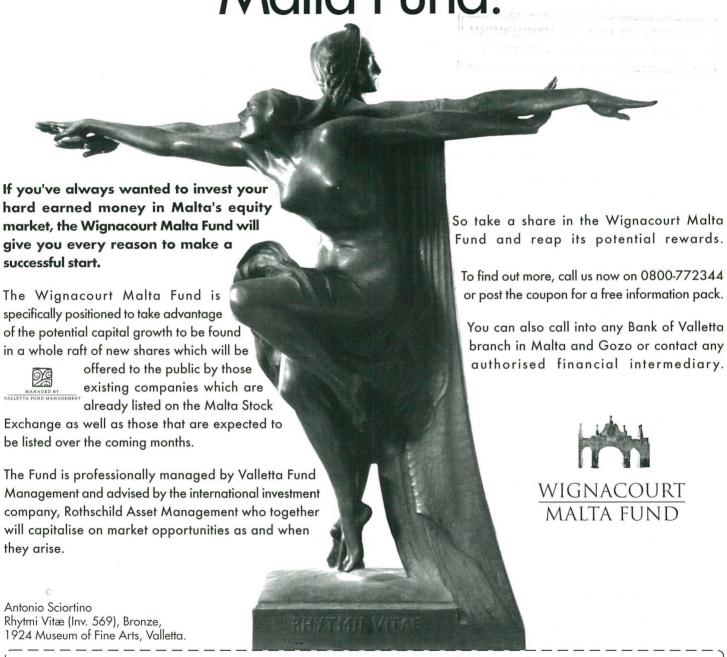
Bħalma ħafna minnkom tafu, is-sena ddiehla irid jidhol fis-sehh 'Collective Agreement' ġdid. Il-Kumitat Ezekuttiv diġa, kemm internament u kif ukoll ma 1-MPO zamm diversi lagaħat. Din iddarba rridu nogahodu attenti biex ma jiġrilniex bħall-aħħar Riforma tal-1993, fejn b'hafna ghaġla zejda iz-zewġ Unions kienu ffirmaw minn ta' l-ewwel nies biex wara kullhadd rikeb il-karru taghna u spiccajna l-aghar li morrna. Ghaldaqstant din id-darba rridu nzommu f'mohhna dan kollu u ma ngħaġlux. L-importanti li dak kollu li jinkiseb jinghata lilna b'effett retroattiv minn Jannar, 2002.

Wiehed mill-aktar ghanijiet nobbli li jrid jintlahaq din is-sena huwa l-bidu shih tal-Benevolent Fund. Dan huwa proģett li ilu f'mohhna mill-bidu li bdejna u li issa jidher li qeġhdin dejjem noqorbu lejh. Kull darba li nisma' (u f'dawn l-ahhar xhur smajt hafna) kazijiet ta' mard fostna n-Nurses u l-Midwives, aktar nikkonvincu ruhna li dan il-Fund irid jibda' llum qabel ghada.

Għal llum se nieqaf hawn izda qabel irrid nawgura l-festi sbieħ ta' l-Għid il-Kbir lilkom u lil familji tagħkom kollha.

Colin Galea

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Att Nobli minn Ann Carruthers

Ta' minn ifaħħar l-għajnuna kollha li n-Nurses u l-Midwives taw lil Sarah Jane Spiteri f'mumenti diffiċli speċjalment in-Nurses u l-Midwives tal-Gynaecology Ward. Fir-ritratt jidher każ tipiku meta Ann Carruthers, Staff Nurse, qaxxret xagħra sabiex tgħin ħalli jinġabru fondi għal Sarah Jane ta' tlett snin. Minn jixtieq jikkontribwixxi jista' jagħmel dan permezz ta' kont fil-BOV Acc. No. 40010302790. Grazzi bil-quddiem.



Iffirmat l-Ewwel Collective Agreement tan-Nurses fl-Isptar Zammit Clapp

Fis-27 ta' Dicembru, 2000 gie ffirmat l-Ewwel Collective Agreement f'isem in-Nurses ta' l-Isptar Zammit Clapp. Dan gie ffirmat bejn il-Hospital Management Committee ta' l-Isptar u l-Administration tal-Union. Dan il-Ftehim wasal wara sensiela ta' laqghat kemm ma l-Management kif ukoll, l-aktar importanti, ma l-istess Nurses li jahdmu fl-Isptar Zammit Clapp. L-MUMN ma setghetx tghati ligal isbah minn dan lill-Membri taghha f'dan l-Isptar. Prosit u Awguri specjalment lil Group Committee ta' dan l-Isptar immexxija b'mod eccellenti mic-Chairman, is-Sur Anton Cini. Fir-ritratt mix-xellug, Prof. Fredrick Fenech, Chairman, Hospital Management Committee, il-President, is-Sur Rudolph Cini u s-Segretarju Genrali s-Sul Colin Galea.



Preparazzjoni sabiex l-MUMN isir Membru fl-ICN

F'Ottubru tas-sena l-oħra Ms. Judith Oulton, Chief Executive Officer ta' l-International Council of Nurses, żaret l-MUMN bi preparazzjoni sabiex l-MUMN issir Membru fl-ICN. Bħala parti mill-programm ta' din iż-żjara, l-MUMN laqqgħat lil Ms. Oulton ma' l-Onor.

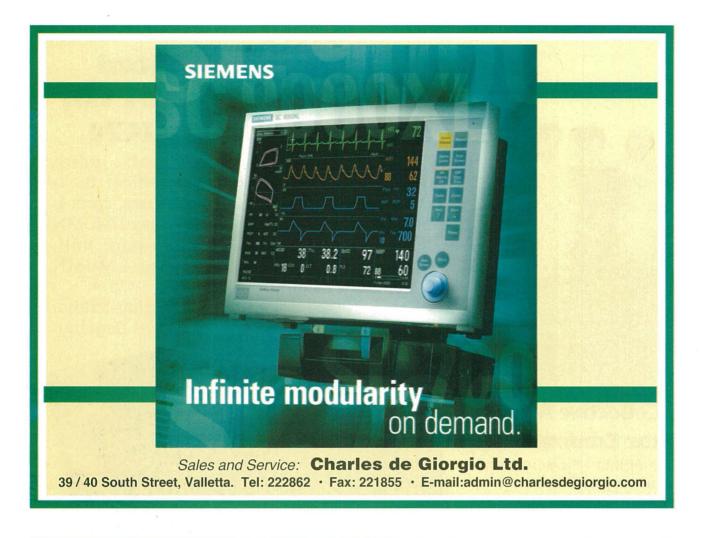
Ministru ghas-Sahha, Dr. Louis Deguara.

Paul Bezzina Sitield

Ghat-tieni sena konsekuttiva l-Kumitat Eżekuttiv hatar "ad hoc" Committee biex janalizza liema Group commitee l-aktar li hadem u stinka favur il-Membri tal-Union. L-'ad hoc' Committee kien iffurmat mis-Sur Paul Bezzina, is-Sinjura Denise Zammit u s-Sinjura Doris Debono. Kif qal is-Sur Bezzina stess, fl-awgurazzjoni tax-Shield fl-attività lil-Union organizzat ghall-żmien l-Milied,

"ma kienitx haġa faċli li l-Kumitat jaghmel l-ghażla finali tieghu, ghax fl-opinjoni taghna l-Group Committees kollha ghamlu l-almu taghhom. Però żgur li hadd ma jista' jinnega x-xoghol tremend li ghamel il-Group Committee ta' l-Isptar Monte Carmeli fejn din is-sena baqgha sa llum stess jorganizza u jinkoraġixxi l-Membri tal-Union biex jibqghu sodi fil-prinċipji taghhom".

Prosit tassew. Ghaldaqstant f'isem il-Bord Editorjali nixtiequ nifirhu lil Group Committee ta' l-Isptar Monte Carmeli ghar-rebh tal-'Paul Bezzina Shield' ghas-sena 2000. Fir-ritratt jidher, mill-lemin ghax-xellug, is-Sur Bezzina jiprezenta x-Shiled lis-Sur Nicholas Cassar, Chairman tal-Group Committee, MCH u warajh il-Vici-Chairman, is-Sur Raymond Galea, fil-prezenza ta' l-Administration ta' l-Union.







Id-drittijiet u d-dmirijiet huma l-ħobża ta' kuljum

Id-drittijiet u d-dmirijiet jorqdu u jqumu magħna. Nistgħu norqdu niġġieldu unqumu niġġieldu. Kulħadd jiġġieled għad-dritt tallibertà, għad-dritt tal-ħajja, u drittijiet oħra tant

importanti qhad-dinjità tal-bniedem.

Hawnhekk tajjeb li nindunaw u li ninnutaw li ahna qed nghixu f'socjetà mghaġġla hafna u l-bniedem jinsa jew ahjar ma jaghtix każ taddrittijiet ta' haddiehor. Id-dmir ta' kull persuna hawn jidhol, u hawn jitlob ir-responsabilità u l-maturità tal-persuna umana li jaghmluha persuna shiha, kompleta fil-milja taghha, specjalment ahna li mhux biss ghandna l-familji taghna Iżda ahna li ta' kuljum inhabbtu wiccna ma'persuni bi tbatija. Dawn ukoll ghandhom id-drittijiet u d-dmirijiet taghhom.

Fill-fatt insibu diversi fatti li huma ta' eżempji kbar u cari. Fost l-ohrajn tiltaqa' ma persuni – ħaddiema li ma jkunux responsabbli, li jabbużaw mill-posizzjoni tagħhom. Tiltaqa' ma ħaddiema oħra li jiġu abbużati min sħabhom u anke minn pazjenti. Dawn l-abbuzi ma jistax ikun li jkomplu għaddejjin. Ma jaġħmlu ġid lil ħadd, għax kulħadd hu bniedem, kulħadd għandu qalb u kulħadd iħoss il-weġgħa.

Dan ifisser li l-peruna li tweġġa' trid tfieq ukoll. Jekk tkun persuna – ħaddiem, trid tfieq ħalli tħossha aħjar fil-karriera u l-professjoni tagħha, u hekk tista' tagħmel aktar ġid. Waqt li jekk tkun il-persuna marida, flimkien malmard fiziku li tkun fl-isptar, biex toħroġ aħjar fil-fejqan, ikollha bzonn tfieq ukoll minn weġgħat li jkunu żiedu minħabba imġieba irresponsabbli . Facli tweġġa' lil dak li jkun. Aħjar toqgħod pass lura u tkun taf x'qed tagħmel u x'ħa tagħmel bil-konsegwenzi kollha li jistgħu jinqalgħu. Wara, il-fejqan jiġi bil-mod ħafna.

Ta' dan kollu ahna rridu inkunu konxji fl-ambjent ta' fejn qed nahdmu, ma' min qed nahdmu, u lil min qed nghinu jfieq. Fuq kollox, ahna bnedmin li qed nghixu f'socjetà, li tajjeb nindunaw li ahna rridu mmexxuha u mhux issocjetà tmexxi lilna.

Fr. John Vella ofm Cap STh. Lic. (Pastorale Sanitaria)

II-PSI u I-ICN jibgħatu Messaġġi ta' Awgurju lill-MUMN

Dear Colin,

What wonderful news! We are very pleased that social dialogue was finally reached and that the conclusions are favourable to Nurses and Nursing. we hope that the precedent for cooperative action is indicative of future negotiations, especially with the reform process underway.

I would very much like to include a short article on the content, process and conclusion of this negotiation in the ICN SEW News, taking into consideration that this is an international audience.

Please transmit our best wishes and congratulations to the members of your Executive Council and staff.

With personal regards,

Mireille Kingma PhD

Consultant

Nursing & Health Policy

International Council of Nurses.

Dear Colin,

Congratulations. We were very pleased to read that an agreement has been reached at Mount Carmel Hospital. It is a great pity that this matter could not have been settled earlier through the process of social dialogue which had been called for by yourselves, the ILO, PSI and ICN. We are pleased that PSI could play a positve role in assisting MUMN. We look forward to our future cooperation.

With best wishes,

Alan Leather,

Deputy General Secretary,

ublic Services International.

One to one communication with a distressed client

Introduction

This study sets out to explore one to one communications with a distressed client. Vascarolis (1994) stated that communication is the medium through which the nursing process is realised. Janosik and Davies (1996) cited Berlo (1960) and described a model of communication, which has five parts: stimulus (referent), sender, message, medium (channel) and receiver. Distress, which is a typical response to crises, is seen to influence the client's behaviour within the therapeutic relationship. The nurse uses a of skills, which facilitate repertoire communication with a distressed client.

Defining distress

Smith (1986) states that when people are distressed they are showing us the mental pain they are experiencing.

Verbally or non-verbally, they convey their anguish. Their loss of composure is a signal to us, they in turn are disturbed by what is bothering them.

(Smith, 1986: 233).

Distress is defined as a considerable mental or physical discomfort, pain or even a need (New Webster's dictionary and Thesaurus of the English Language, 1991). Other words for distress are anxiety, grief, misery, pain, torture, unhappiness, depression, headache and desolation (The Oxford Thesaurus, 1991: 105). These descriptions show that feelings of distress can be mild to very severe. Moreover, distress is a crisis reaction where the crisis is a short period of psychological stress and involves an upheaval in one's life (Wilson an Kniesl, 1996). Distress reaction falls under two major categories: anticipated, as is the birth of a baby, which is considered as developmental or unexpected as the birth of a Down's Syndrome baby. The later implies perceived loss of roles (Porritt, 1990).

Responses to crisis

In a crisis situation the distressed client shows preoccupation about the event, feels isolated and distant. The client might be tearful, withdrawn and unable to think clearly. However, there is an increase in the need for closeness shown by eye contact, touch, standing near, disclosing deep information and using intimate language. The Little Oxford Dictionary (1986) defines intimate as being of a familial nature (pg: 285). The person is looking for warmth and comfort where his loss of confidence heightens sensitivity to the judgements of others (Porritt, 1990). The nurse assists the client to find the positive in herself and work with the person's strengths.

A distressed person might also show a random and unexpected behaviour that does not conform to role expectations (Porritt, 1990). This might be seen in the event of a birth, which does not bring the expected happiness to the mother. Significant people in the person's life might influence resolution of crises. They might be tolerant and accepting of distress but might or might not reinforce effective behaviour (Wilson and Kniesl 1996). Finally, the nurse might be a key person who influences resolution of crisis.

The therapeutic relationship

Developing a therapeutic relationship is important to rapport building and is a key skill in nursing (Slade 1992). The therapeutic relationship, unlike the social and intimate relationships, offers the client, an understanding of human behaviours. Together with personal strengths it enhances personal growth in the client (Vascarolis, 1994). Effective communication is the foundation for a therapeutic nurse-client relationship. However, nurses might be in control of the client when they use coercion and deprive the client of her autonomy (McDougall, 1997). Finally, Dexter and Walsh (1996) stated that the nurse must be someone special by utilising her personality in order to give some meaning to the client's life.

Helping the patient

The nurse's role is helping the client to help herself (Porritt, 1990). The first step is to define the actual problem and the nurse encourages the client to

express her emotions, whichever are causing the distress. The client requires **acceptance**, which involves unconditional regard, where the patient is seen as worthy of attention and consideration (Rogers 1965). Burnard (1993) further states that **warmth** involves absence of blame, non-defensiveness and closeness, having respect for the individual's feelings and behaviour. Moreover, the nurse uses **empathy**, which unlike sympathy is responding to the message with understanding and without the need to solve the problem for the client (Porritt). Finally, **trust** is established where the person is able to explore ideas and feelings without fear of judgement (Slade, 1992).

Active listening

Active listening might be of considerable help for persons experiencing distress. It involves listening attentively where the nurse observes the client's verbal and non-verbal messages and responds relevantly. Caring and concern for the client may communicated by acknowledging understanding of messages (Collins, 1983, cited by Porritt, 1990). The client's attention might also be hindered by his overwhelming feelings (Slade, 1992). Silence encourages the client to communicate, gives the client time to collect thoughts, consider alternatives to problem solve and conveys the nurse's full acceptance of the client (Vascarolis 1996).

Active listening is best accomplished when environmental distractions are minimised. This involves a quiet place and closing the door. It is also important to remember that the distressed person has an increased level of anxiety. Slade (1992) recommends the use of the mnemonic S O L E R, which helps to remind the nurse to face Squarely, adopt an Open posture, Lean when appropriate Maintain good Eye contact and Relax.

Moreover, distance maintained between the two conveys meaning about the degree of closeness desired by the distressed client. The nurse needs to be aware of not violating the client's personal space, by standing too close or by not asking permission to do so. Intrusions into personal space might cause resentment, or even cause panic reactions to an anxious client. The nurse observes clues from the client, which might give permission to break the physical distance further leading to touch (Taylor et al, 1989). Finally, clues might be facial expressions and body movement.

However, verbal messages might disagree with non-verbal signals. When these are not congruent the nurse determines which is the most important message being transmitted (Porritt, 1990). When a client says that he is better today but is pacing up and down the corridor communicates that the client is still anxious.

The tone and decibel level gives information about its meaning and transmits spoken communications for sender and receiver. The client who shouts and the client who whispers divulge considerable information about the meaning of intended message. Finally, Knowles (1985) suggests that nurses can use mirroring the client's verbal and non-verbal behaviour to help the client follow the nurse's lead. For example, the nurse mirrors the behaviour of the anxious client, and then shifts to a more relaxed posture and to a less anxious state.

Conclusion

This study has attempted to explore one to one communications with a distressed client. Definitions of distress were identified, where it was found to be a typical response to crises. Moreover, distress influences the type of relationship between the nurse and the client. Finally, facilitative communication skills are essential to help the client resolve his distress.

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This paper was set up by Carmen Galea RMN (FW8), Cettina Cassar RMN (FW2) and Claudine Camilleri RMN (FW6). These nurses are currently working at Mount Carmel Hospital.

ENTERFAMMENT GROUP COMMITTEE

Attivitajiet 2001-

Fl-okkażżjoni tal-Hames Sena Anniversarju mit-twaqqif ta' l-MUMN, l-Entertainment Group Committee se jorganizza ģimgha ta' attivitajiet biex jiģi ccelebrat dan l-Anniversarju:

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☐ It-Tlieta, 18 ta' Settembru

□ L-Erbgħa, 19 ta' Settembru

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Wara is-success li kellna is-sena l-oħra, l-Entertainment Group Committee se jerġa jorganizza kemm l-attività ta' lSplash & Fun kif ukoll id-dawra bid-dgħajsa ta' madwar Kemmuna u Għawdex, fuq talba ġenerali.

Il-Malta Union of Midwives & Nurses lahqu ftehim ma ATV
Travel fejn il-Membri kollha aggornati fil-hlas se jkunu ntitolati ghal Discounts fil-prezz tal-biljetti kemm ta' l-ajru kif ukoll tal-Cruises. Kull minn hu interessat ghandu

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New Faces on the educational committee of MUMN

Last September, the educational and International role of the Nurses' Association of Malta (NAM) was handed over to the educational committee of MUMN. Some members of the executive council of NAM

joined the already existing educational body. Therefore, the committee now consists of Tony Bugeja, Helen Zammit, Dorothy Bonello, Reggie Aquilina, Nathalie Zammit and Corinne Scicluna. Mr. Effie Ciantar and Miss Mary Borg resigned from their post for personal reasons. We take this opportunity to thank them for their valuable contribution to this group.

The MUMN is now affiliated with the International Council of Nurses (ICN) and the Commonwealth Nurses Federation (CNF) – two groups that originally were

affiliated with NAM. The educational committee keeps close liaison with ICN and CNF and plans to inform all our members of any arising matters that might be of interest to them. At present the ICN is to hold their biannual conference next June in Denmark. The CNF is also planning another conference in Cyprus in 2002. Anyone interested in these activities may either contact the Union or any member of the educational committee.

Corinne Scicluma
Chairperson
Educational Committee
(MUMN)



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Your heart beats 103,689 times.

Your blood travels 168,000,000 miles

You breathe 23.040 times.

You inhale 438 cubic feet of air.

You eat 3 and 1/4 pounds of food.

You drink 2.9 quarts of liquids.

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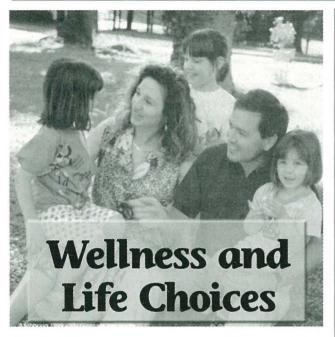
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In the last publication of "Il-Musbieh", I presented an overview of the various dimensions of health and wellness. Today, I am writing about the wellness lifestyle.

Although you might readily say that you desire the state of wellness as a personal goal, many of us have experienced frustrations and discouragement in attaining this goal. Wellness is not something that merely happens to you. It is the result of being consciously aware of what your physical and psychological well-being entails and making a commitment to wellness. Wellness is more than the absence of illness. In many ways, the medical model ignores wellness and focuses on the removal of symptoms, which result in a negative view of health. Relatively few physicians ask their patients questions about aspects of their lifestyles that may have contributed to their health problems.

An honest examination of the choices you are making about your body and the overall wellness can reveal a great deal concerning your feelings about your life. If you are not taking care of your body, what beliefs and attitudes may be getting in the way? What resources do you require to begin modifying those parts of your lifestyle that affect your bodily well-being?

Dantelle, Snow-Harter, and wilcox (1995) state that if you are living a wellness lifestyle you are moving toward more deliberate, conscious actions to create the best self possible within the limitations of your situation. They emphasise three aspects that characterise a wellness lifestyle:

- assuming personal responsibility for your actions and the quality of your health
- having a genuine concern for others and being tolerant of imperfections in others
- being willing to devote time and energy to developing a sound basis for making good decisions about health

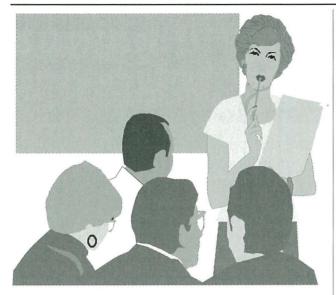
And what are the benefits of adopting a wellness lifestyle? Donatelle and her colleagues (1995) list these important long-term benefits:

- improved cardiovascular efficiency
- increased muscular tone, strength, flexibility, and endurance
- reduced risk for injuries
- improved sense of self-control, selfefficacy, and self-esteem
- improved management and control of stress
- improved outlook on life
- improved interpersonal relationships
- decreased mortality (death) and morbidity (illness) from infections and chronic diseases

It is clear that wellness is a lifestyle choice rather than a one time decision. Wellness is a process that involves identifying personal goals, prioritising your goals and values, identifying any barriers that might prevent you from reaching your goals, making an action plan, and then committing yourself to following through on your plans to reach your goals.

The essence of wellness is captured in these brief statements:

- Wellness is a choice a decision to make toward optimal health.
- Wellness is a way of life a lifestyle you design to achieve your highest potential for well-being.
- Wellness is a process a developing awareness that there is no end point but health and happiness are possible in each moment, here and now.



- Wellness is an efficient channelling of energy - energy received from the environment, transformed within you, and sent on to affect the world outside.
- Wellness is the integration of body, mind, and spirit - the appreciation that everything you do and think and feel and believe has an impact on your state of health.
- Wellness is the loving acceptance of yourself.

Schafer (1992) describes wellness as living at your highest possible level as a whole person. His guiding philosophy about wellness can be summarised in these four suggestions:

- Allow yourself to have visions and dreams, some of which have social significance or will benefit others in significant ways.
- Be willing to work hard, sometimes with others, to make these dreams and visions a reality.
- Balance hard work and play, care of the body and spirit, and intimate relationships.
- Enjoy the process of living.

References

Donatelle R., Snow-Harter C., & Wilcox A. (1995) Choices for health and fitness Redwood City, CA: Benjamin/Cummings.

Schafer W. (1992) <u>Stress management for Wellness</u> 2nd edition, Orlando, FL: Harcourt Brace Jovanobich.

Critical thinking about wellness:

Wellness means different things to different people. When you think of wellness, what aspects of your life do you most think of? Look at what you are doing to maintain a general state of wellness. How much of a priority do you place on wellness? What can you improve on (e.g. diet, exercise, relationships, relaxation)? Seek professional support if need be.

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Ejjew Nieqfu Ftit...

Lament

I never get mad: I get hostile. I never feel sad; I'm depressed. If I sew or I knit, and enjoy it a bit, I'm not handy; I'm merely obsessed. I never regret; I feel guilty. And if I should vacuum the hall, Or the sofa and such, and not mind it too much, Am I tidy? Compulsice, that's all. If I don't like your hat, it's sex conflict (And aversive reactin to net?) I never get worried or nervous or hurried -Anxiety - that's what I get. If I'm happy, I must be euphoric. if I go to Axis Disco or a Rave party And have a good time, making puns or a rhyme, I'm a maniac - or may be a "Schiz". If I think the bus driver was nastly, I'm just paranoid, clear as can be, If I take a neat drink without stopping to think -Alcoholics Anonymous that's me. If I tell you you're rigvht, I'm submissive; Repressing aggressiveness, too. Should I once disagree, I'm defensive, you see, By projecting my symptoms on you. I love you., But that's just the transference, With Oedipus rearing his head. My breathing asthmatic is psychosomatic -It's a fear of exclaiming, "Drop dead". I'm no lonely; I'm simply dependent; And my he-manlky mo' masks a tic So I look like a cd? Never mind, just be glad; I'm not really a stinker - I'm Sick!

A. Scilerras

How do we measure?

Foot: the length of Charlemagne's foot, modified in 1305 to be thirty-six barley corns laid end to end.

Inch: the width across the knuckle on King Edgar's thumb, or, obviously, three barley corns.

Yard: the reach from King Henry I's nose to his royal fingertips, a distance twice as long as a cubit.

Cubit: the length of the arm from the ebow to the fingertips.

Mile: one thousand double steps of a Roman legionary. Later Queen Elizabeth I, added more feet so the mile would equal eight furlongs.

Furlong: the length of a furrow that a team of oxen could plough before resting.

Acre: the amount of land a yoke of exen could plough in one day.

The metric system: ont he other hand, uses the meter, defined precisely as 1,650,763.73 wavelenghts of orange-red light emitted by the krytion - 86 atom, or originally one-ten-millionth the length of the longitude from the North Pole to the Equator.

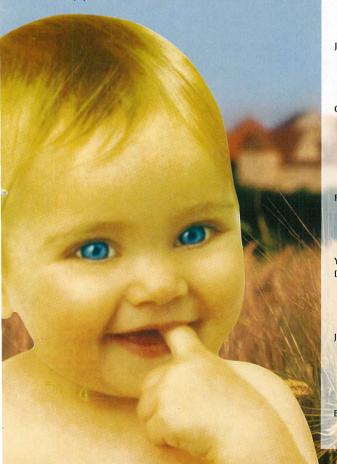
Meter: is exactly 39.37 inches - or, that is, some 118 barleycorns.





WHY SHOULD YOU RECOMMEND OUR BABY FOODS?

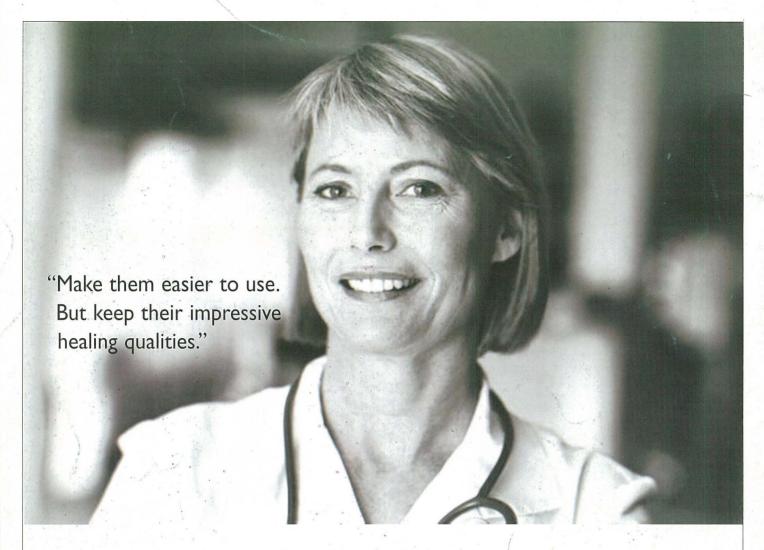
All Plasmon foods are made with the freshest and finest ingredients you can find. Plasmon foods are made under stringent quality standards through the OASI ECOLOGICA system. Here agricultural experts strictly monitor each phase of cultivation and production. Produce is grown in fields and orchards, away from heavy traffic and industrialized areas. All water used is from uncontaminated sources and pest control is biological. The OASI ECOLOGICA PLASMON also boasts of excellent farm-animal rearing techniques where cows are left to roam freely in unspoilt pastures; chickens are free-range which means that all animals are reared in as natural a way as possible. Animals here are not given antibiotics and hormones to fatten them up; such chemicals leave a residue in the meat and dairy produce, which can have adverse effects on the human body. Plasmon has invested heavily so as to ensure maximum quality but above all safe and completely nutritious food for infants. Each Plasmon product carries the unique guarantee of the OASI ECOLOGICA where our raw materials are grown and reared in a fully protected and natural environment.



Information about Plasmon products

Variety Available

Camomille	Sachets *24 Granules 180g	Diffuse in boiled water	Any age
Cereals	 Crema di riso 200gr Semolino 200gr 4 Cereali 200gr Pappa lattea biscotto con frutta mista 250gr Pappa lattea riso mais mela e banana 250gr Crema di riso con verdure miste 200gr 	Mix with pre-boiled water or milk	4th month
Prima Pastina	Sabbiolina 320grForellini micron 320grBebi riso 300g	Cook in broth or boiled water	4th month
Pastina	Puntine 340grGemmine 340grAnellini 340grFili d'Angelo 340grAstrine 340gr		5th month
Jars fruit	Mela 120grBananas 120grMixed fruit 120grPera 120grPrugna 80gr	Spoon out amount desired into baby utensil	4th month
Jars food	Vegetable & Beef 120gr Vegetable & Chicken 120gr Filetto di Salmone con Verdure Miste 80gr	Warm jar and feed	4th month
Concentrates	 Manzo 120gr Vitello 120gr Coniglio 80gr Tacchino 80gr Pollo 80gr Manzo & Prosciutto 80gr 	Warm jar & add to pastina, cereal or fresh broth	4th month
Formaggini	Formaggino 80gr Formaggio con mela 80gr Formaggio banana e pera 80gr	Serve alone or with pastina Serve after dinner or as a snack	4th month 5th month 5th month
Yoghurts/ Desserts	Yogurt con Pera 120gr Yogurt con Albicocca 120gr Yogurt con Banana 120gr Banana, apple, honey & biscuit 120gr	Serve as midday snack. May be served chilled	4th month 5th/6th month
Juice drinks	 Pera 125ml Albicocca 125ml Pesca 125ml Prugna 125ml Mela 125ml 	Can be given in beaker	4th month
Biscotti	PrimiMesi 300gr Biscotti 180gr or 360gr Junior yoghurt cacao 320gr	In bottle As finger food or as snack Snack	3rd month 5th month 1st year



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- increased viscosity ensures that the gels will better stay in place

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